

Fig. 1

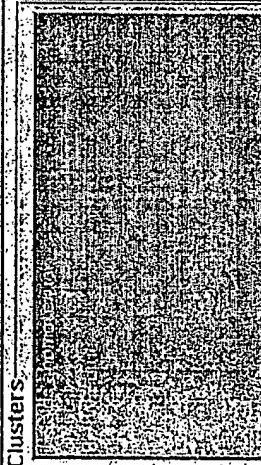
InsightLook Environment - [Text connections]	
<input type="checkbox"/> Application: DateEntered: DateEntered: DateEntered: Search: Admin: Clusters: Employees in selected cluster Name: Email Address: Job Title: Phone Number: <input checked="" type="checkbox"/> Without Queries Quizzes Selected: 210 Knowledge Map: 	<p>Prevention case management (PCM)</p> <p>Client-centered HIV prevention activity with the fundamental goal of promoting the adoption of HIV risk-reduction behaviors</p> <p>Health communication/Public information (HC/Pi)</p> <p>The delivery of planned HIV/AIDS prevention messages - through one or more channels to targeted audiences - that are designed</p> <p>Individual level intervention (IL)</p> <p>Health education and risk-reduction counseling provided to one individual at a time</p> <p>Group level intervention (GL)</p> <p>Health education and risk-reduction counseling (see above) that shifts the delivery of service from the individual to groups of individuals</p> <p>Four of the most commonly cited theories in HIV prevention literature are outlined in this booklet: The Health Belief Model, the AIDS Risk-Reduction Model, the Stages of Change, and the Theory of Reasoned Action</p> <input type="checkbox"/> show document
<p style="text-align: center;">230</p> <p style="text-align: right;">220</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> aids <input checked="" type="checkbox"/> drugs <input checked="" type="checkbox"/> risk-reduction, counseling, support, behaviors, prevention <input checked="" type="checkbox"/> intervention, exposure, education, clients, outreach <input checked="" type="checkbox"/> drugs <input checked="" type="checkbox"/> change, stages, theory <input checked="" type="checkbox"/> access, adap, drug, formulary, Infected <input checked="" type="checkbox"/> studies, cost-effective, therapies, study, researchers <input checked="" type="checkbox"/> hiv <input checked="" type="checkbox"/> costs, cost <input checked="" type="checkbox"/> health, model, change <input checked="" type="checkbox"/> patients <input checked="" type="checkbox"/> per, cd4, qaly, cmv, prophylaxis <input checked="" type="checkbox"/> haart, cost-effectiveness <input checked="" type="checkbox"/> antiretroviral, therapy, disease, testing <input checked="" type="checkbox"/> treatment <input checked="" type="checkbox"/> percent, infection, hiv-infected, sex, 1993, tda <input checked="" type="checkbox"/> protease, kaletra, ritonavir <input checked="" type="checkbox"/> women, sids <input checked="" type="checkbox"/> intervention, education, risk-reduction, prevention <input checked="" type="checkbox"/> risk, transmission, behaviors, populations <input checked="" type="checkbox"/> retrovirus 	

Fig. 2

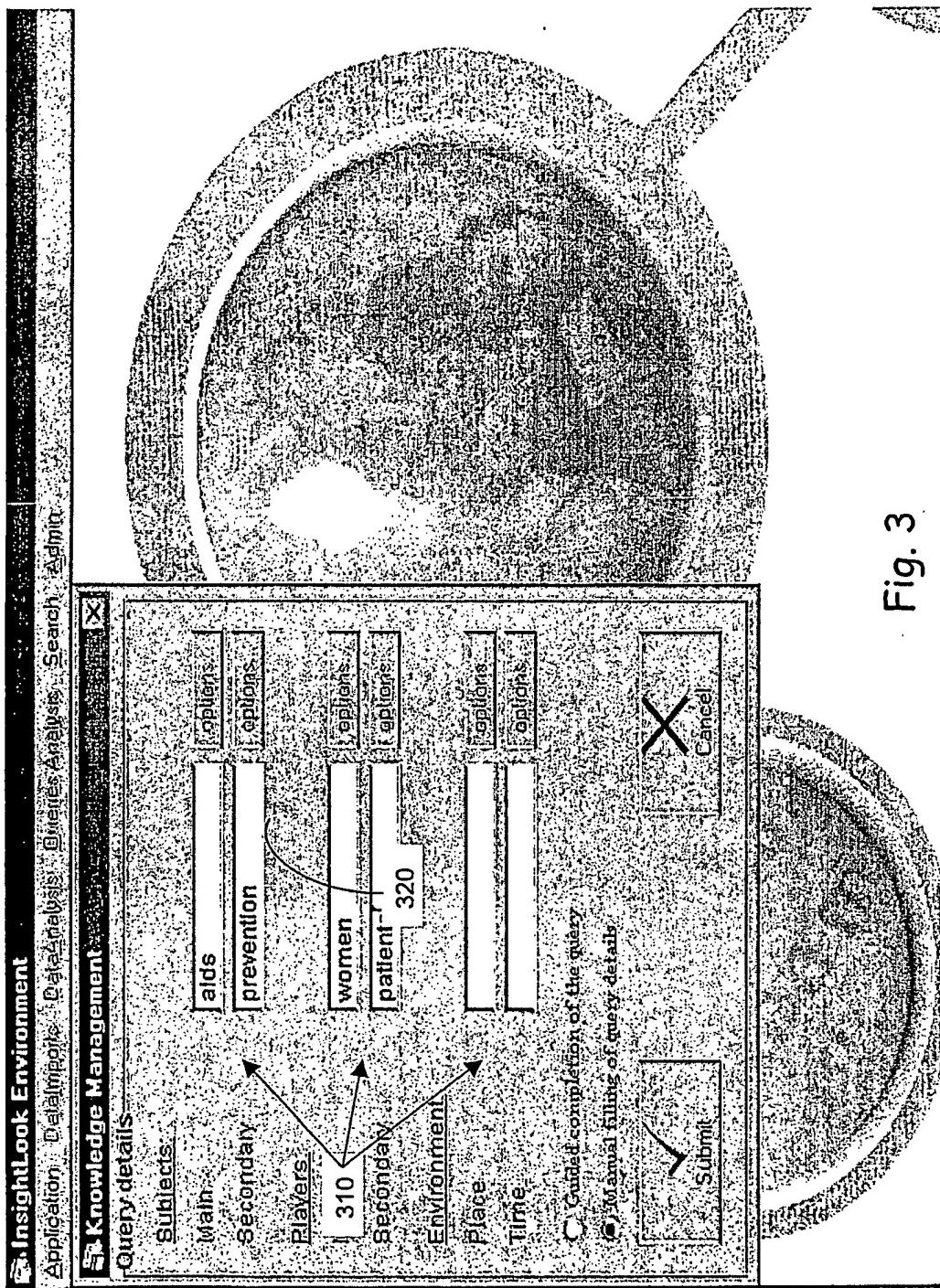


Fig. 3

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Document pointed to by the query

File Edit Search Help

73 Women & AIDS.txt - Notepad

File Edit Search Help

Hit Ratio Source Query

9.Women & AIDS.txt [Aids] [prevention] [Women]

410 [Aids] [prevention] [Women]

[Aids] [prevention] [Women]

[Aids] [prevention] [Women]

104.Better_Cost_Benefit_Ratio_Found_Far [Aids] [prevention] [Women]

106_How_Risk_Population_Categories_&_I [Aids] [prevention] [Women]

This article originally appeared in the
October 1993 FDA Consumer.

PUBLICATION NO. (FDA) 94-1211

By Marian Segal

Infections with HIV, the virus that causes AIDS, are rising nearly four times as fast in women as in men. Among adults, men with AIDS outnumber women about 8 to 1; in adolescents, the ratio is less than 3 men to 1 woman.

"Although in the United States, women currently represent a relatively small percentage of persons with HIV, they are the most rapidly growing segment of the HIV-infected population in this country,"

The disease disproportionately affects minority women. Although African-American and Hispanic women make up 21 percent of the country's female population, they account for 74 percent of women diagnosed with AIDS.

In this country, most women who now have AIDS became infected

420

440

430

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Fig. 4

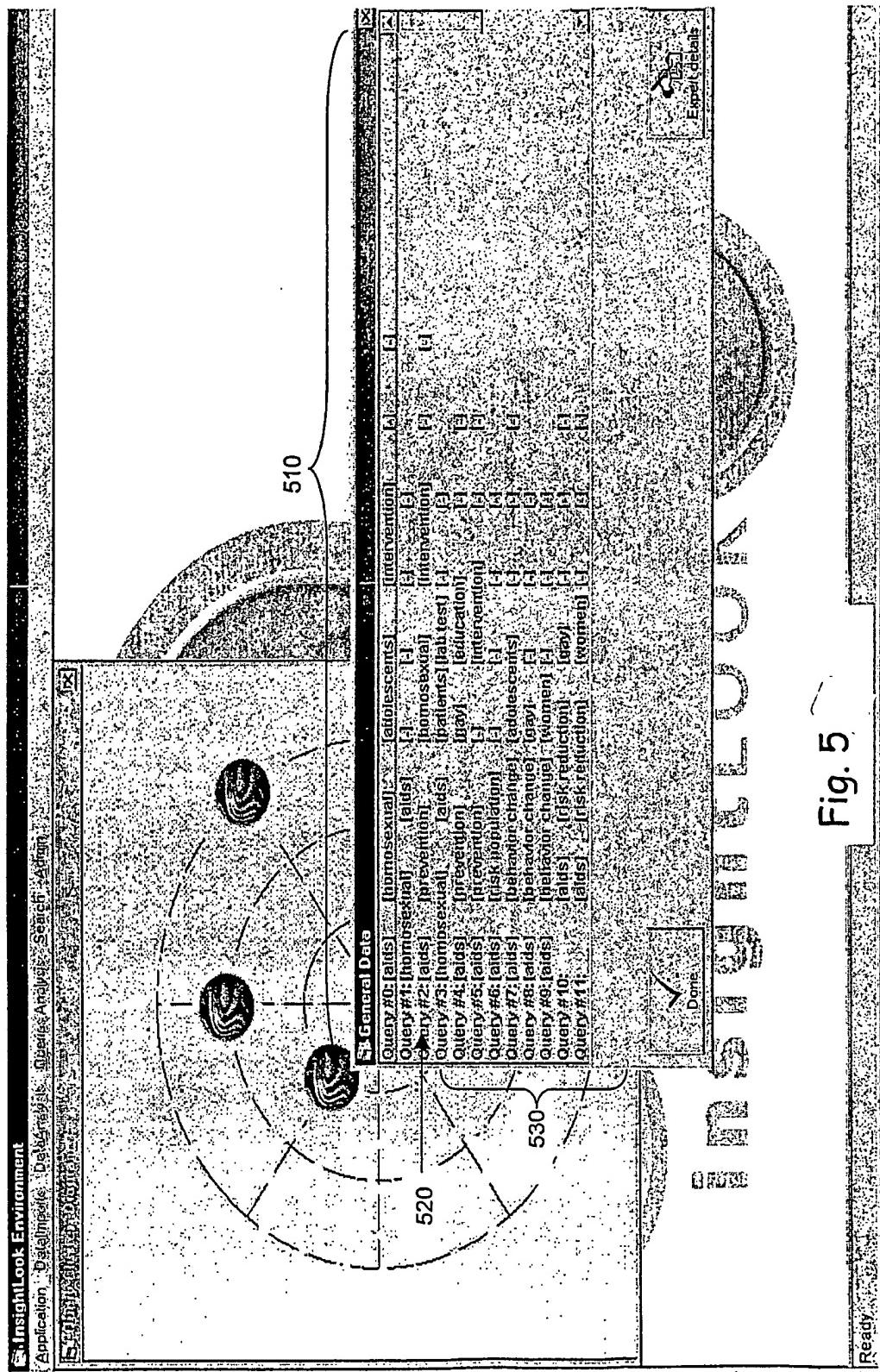


Fig. 5

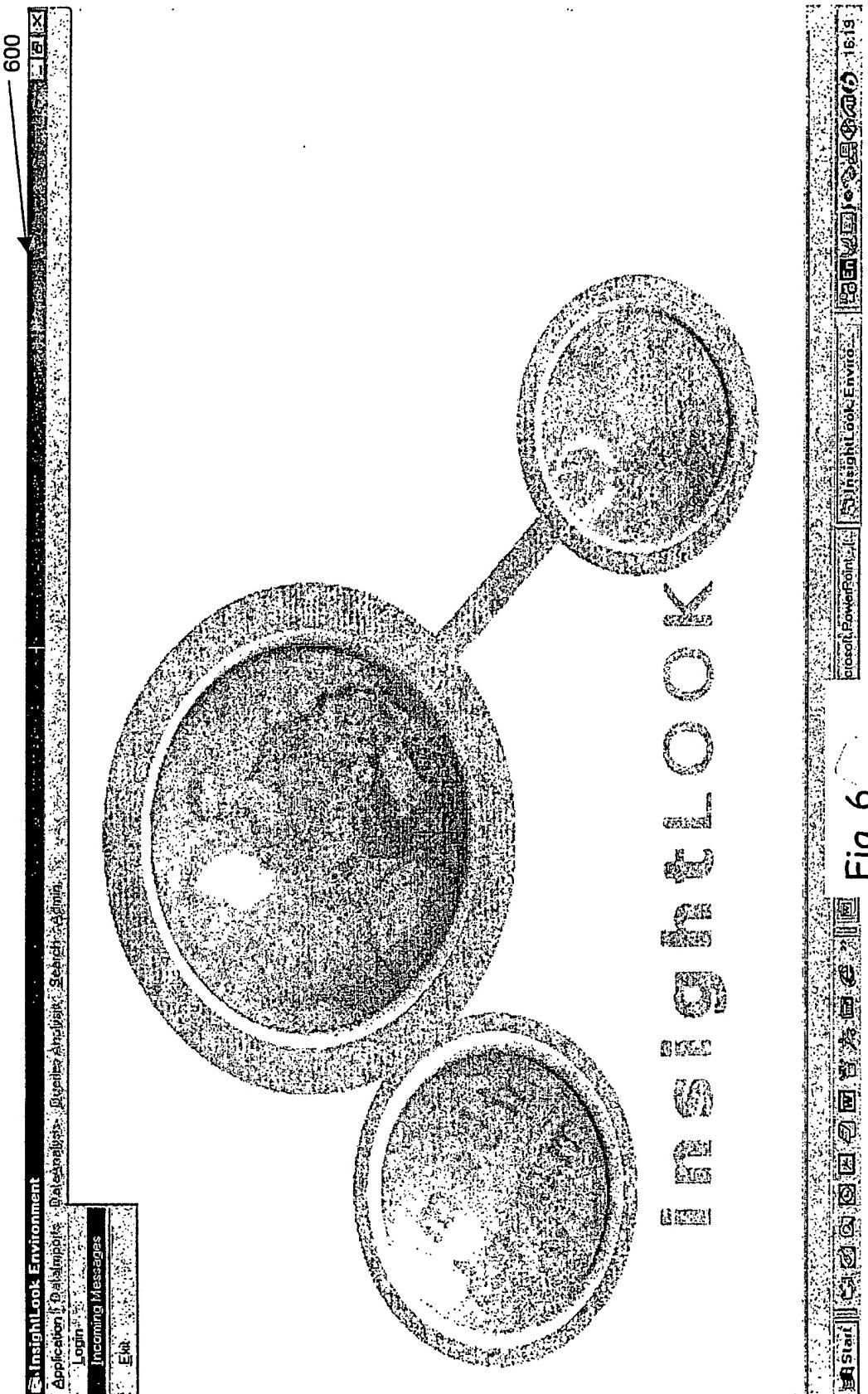


Fig. 6

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Insight!Look Environment - Text connections	
<input type="checkbox"/> Application <input type="checkbox"/> Data Import <input type="checkbox"/> Data Analysis <input type="checkbox"/> Organizational Model <input type="checkbox"/> Search & Admin 	<input type="checkbox"/> Employees in selected cluster Custars 1. homosexual, aids 2. cost 3. 710 4. bartonella, aids 1. homosexual, aids 2. cost 3. 710 4. bartonella, aids
<p>The cost per patient typically ranges from \$10,000 to \$15,000 a year in the United States. Putting the drugs beyond the reach of many people without adequate insurance.</p> <p>Unfortunately, a disproportionate number of people with HIV are poor or lack insurance thus increasing the demand for governmental aid.</p> <p>According to the NEJM editorial, Medicaid is the largest health insurance program for people with AIDS, providing treatment to 50 percent of adults and 90 percent of children.</p> <p>Not surprisingly, the RAND study showed that drug costs were lower and hospital costs were higher among underserved groups, including blacks, women, and patients without private insurance.</p> <p>While many insurance carriers pay for these tests, many Medicaid programs do not.</p>	
<p>7/9</p> <p>720</p> <p>Text connections</p> <p>Pressing OK will refresh all data presented on this form.</p> <p><input type="button" value="OK"/> <input type="button" value="Cancel"/></p>	

Fig. 7

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The screenshot shows the InsightLook Environment interface with the following details:

- Top Bar:** Application, Datamarts, DataElements, Diagrams, Admin.
- Left Sidebar:** Clusters, [redacted].
- Cluster View:**
 - Cluster 810: Contains items 1 through 7: aids, bartonella, 2, sids, cost, kalaria, treatment, retrovirus, cryptosporidiosis, hv.
 - Cluster 820: Contains cost, doctors, insurance, study.
 - Cluster 823: Contains cost.
- Employee Record View:**

Employees in selected Cluster	
Name	Mt. Yen
Email Address	Yan@MII.com
Job File	
Account	
Phone Number	555-4041
- Text Connections:**
 - Cluster 810 connects to the Employee Record via a callout pointing to the 'cost' field.
 - Cluster 820 connects to the Employee Record via a callout pointing to the 'cost' field.
 - Cluster 823 connects to the Employee Record via a callout pointing to the 'cost' field.
 - Cluster 830 connects to the Employee Record via a callout pointing to the 'cost' field.
 - Cluster 835 connects to the Employee Record via a callout pointing to the 'cost' field.
- Callouts:**
 - From Cluster 810 to the Employee Record: "While many **insurance** carriers pay for these tests, many **Medicaid** programs do not."
 - From Cluster 820 to the Employee Record: "ADAP is administered individually by all fifty states, with each state establishing criteria for enrollment (usually based on income level and, in some cases, the lack of adequate **insurance coverage**) and listing the medications available for payment."
 - From Cluster 823 to the Employee Record: "The **cost** per patient typically ranges from \$10,000 to \$15,000 a year in the United States, putting the drugs beyond the reach of many people without adequate **insurance**."
 - From Cluster 830 to the Employee Record: "Unfortunately, a disproportionate number of people with HIV are poor or lack **insurance**, thus increasing the demand for government aid."
- Bottom Right:** Text connections dialog box with OK and Cancel buttons.

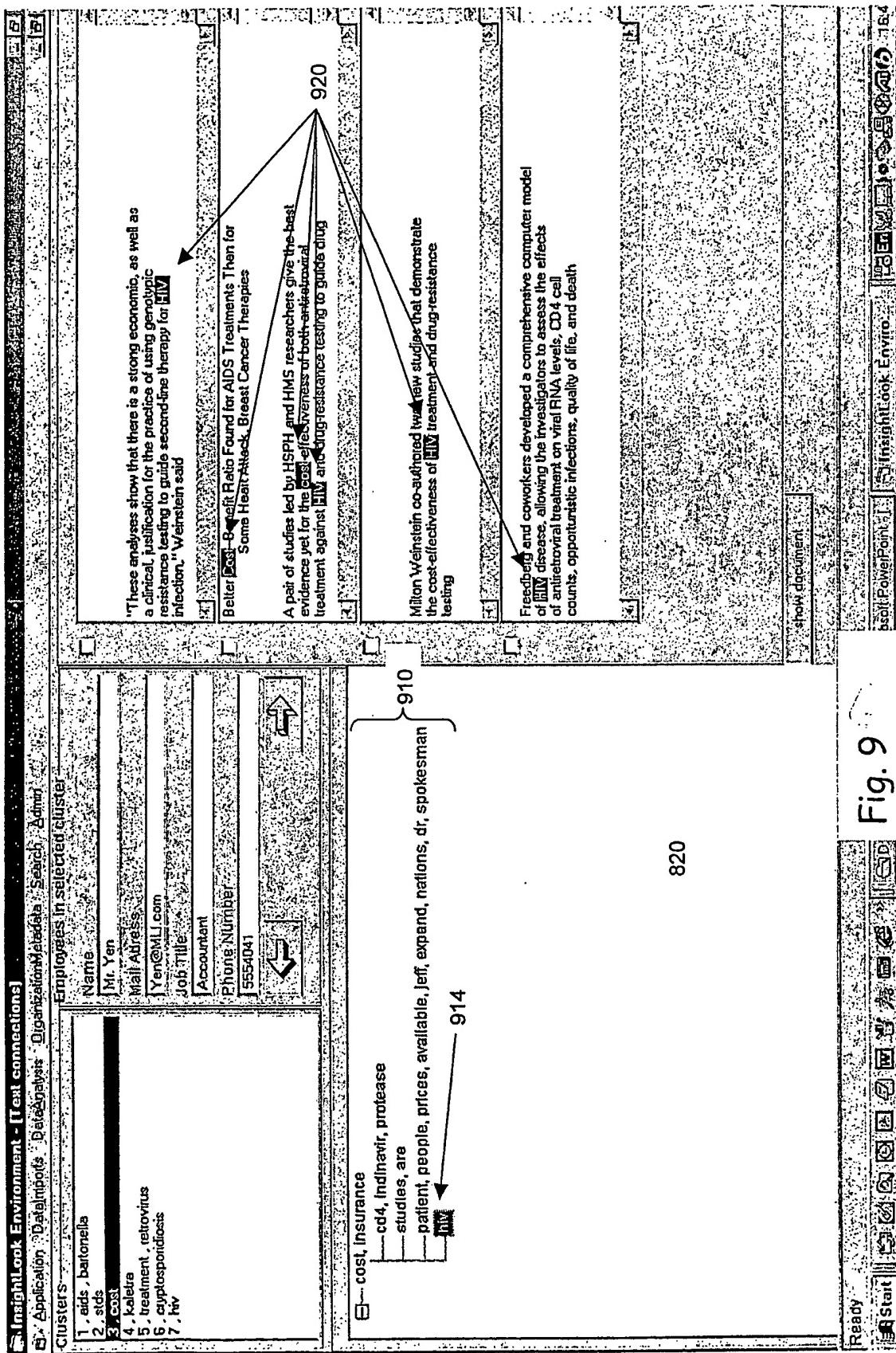
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Fig. 8

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